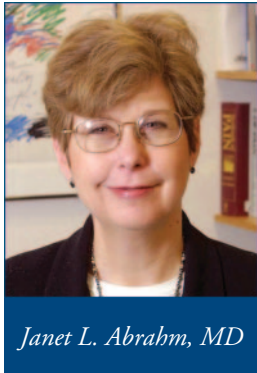


American Academy of Hospice and Palliative Medicine: Dedicated to Prevention and Relief of Suffering



Janet L. Abraham, MD

By Janet L. Abraham, MD, for the American Academy of Hospice and Palliative Medicine

The American Academy of Hospice and Palliative Medicine (AAHPM) is an organization of physicians and other health care professionals dedicated to excellence in and advancement of palliative medicine through prevention and relief of patient

and family suffering by providing education and clinical practice standards, fostering research, facilitating personal and professional development, and by public policy advocacy. Members of the AAHPM are committed to furthering and fostering the practice of palliative and hospice care for patients with advanced life-limiting disease and their families. The AAHPM currently has more than 2,600 members.

The Academy supports the dissemination of research, the training of academic leaders, and the continuing education of clinicians in evidence-based practice through:

- Support for the College of Palliative Care, responsible for the development and support of leaders in interdisciplinary palliative care research and education
- Courses for board certification review and for hospice medical directors
- Publications (i.e., a monthly electronic publication that offers critical summaries from over 30 medical and scientific journals, the *Journal of Palliative Medicine*, the Primer of Palliative Medicine, The Pocket Guide to Hospice/Palliative Medicine, the Core Curriculum in Hospice and Palliative Medicine, and a quarterly newsletter)
- An annual conference providing the latest palliative medicine research and award program for distinguished researchers and young investigators
- Networking opportunities and special interest groups

ASCO and the AAHPM agree that expert palliative care is needed not only at diagnosis, but also during treatment and throughout the continuum of care. Patients on active treatment have physical and psychological distress, and also economic and social burdens. However, in their desire to appear to be “good patients” and in their gratitude to the oncology team for what they have done, patients and families may be reluctant to share with the oncology team the extent

of their symptoms, or, as disease progresses, their desire to stop therapy. They worry that if they no longer take chemotherapy or if they enter a hospice program, they will lose their relationship with the oncology team. Approximately 50% of hospices nationwide admit patients who are receiving chemotherapy. As the cancer becomes refractory, the focus of the palliative care or hospice program interventions expands to include attention to existential suffering, the transition off chemotherapy to care focused on comfort and quality of life, and concerns about personal relationships. After the patient’s death, bereavement care to the survivors is provided.

In 2005, ASCO recognized the need for professionals with specialist-level expertise in palliative care, and supported the recognition of palliative medicine as a subspecialty of internal medicine. Palliative medicine is likely to become an official American Board of Medical Specialties–recognized subspecialty in 2006. In addition to the American Board of Internal Medicine, to date, six other primary boards have cosponsored the resolution, including Surgery, a primary board of many ASCO members. There will likely be a period of time when physicians who have not completed a palliative medicine fellowship can become certified in hospice and palliative medicine through an experiential pathway under a grandfathering clause.

ASCO believes that a generalist understanding of palliative care is a core aspect of the practice of oncology that must be included in oncology training programs. ASCO recognizes that death is a natural and inevitable end to life and that the medical profession should attend to all the needs of the dying patient and their family. Under the leadership of Jamie von Roenn, MD, palliative care activities involving members of the AAHPM have taken an important role at ASCO meetings. There have been numerous pre-courses and educational sessions, as well as scientific sessions that present the latest research in palliative care.

Most recently, under the leadership of von Roenn, a collaboration among oncologists who are AAHPM members and experts in palliative care, with the Education in Palliative and End-of-Life Care project of the Feinberg School of Medicine, Northwestern University, the National Cancer Institute, and ASCO led to the creation of a palliative care educational course for practicing oncologists titled, “Education in Palliative and End-of-Life Care–Oncology” [EPEC-O]). Master teachers, many of whom were ASCO and AAHPM members, were recruited to begin a train-the-trainer program for this curriculum. The next steps will be a nationwide rollout of this curriculum.

Oncologists and other oncology professionals with an interest in palliative or end-of-life care are invited to attend the annual meeting of the AAHPM and to submit abstracts, workshops, educational sessions, and case studies. More information about the meeting is available at www.aahpm.org. The Web site also has information regarding Academy membership, publications, educational activities, research

conferences, accredited fellowship programs, and links to educational resources in palliative care and to "Clinical Practice Guidelines for Quality Palliative Care."

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